Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or rate level (1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
Automobile Liability Private Passenger Commercial		
Automobile Physical Damage		
Private Passenger Commercial		
Liability Other Than Auto	\$91,143	9.0%
Burglary and Theft	ψο 1,1 40	0.070
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	\$375,248	8.0%
10. Extended Coverage	incl	incl
11. Inland Marine	Name of the state	
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Line of Insurance		
Ellie of Histianics		
Does filing only apply to certain territory (terr	ritories) or certain classes? If so, speci	fy: <u>No</u>
Brief description of filing. (If filing follows rate under ISO Filing Designation Number ML-20		
*Adjusted to reflect all prior rate changes. **Change in Company's premium level whic	h will result from application of new rat	es.
	American Mo	dern Home Insurance Company
		Name of Company
	StemyW	Assistant Vice President
		Official – Title

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision

(1)	(2) Annual Premium	(3) Percent
Coverage -	Volume (Illinois) *	Change (+or-) **
Automobile Liability Private	***	
Passenger		
Commercial		
Automobile Physical Damag		77
Private Passenger		
Commercial		
Liability Other Than Auto	60,235	-8.2%
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril	**************************************	
Crop Hail		
Other		****
Life of Insurance		
Does filing only apply to certain	in territory (territories) or	certain
Classes? If so,	,	
specify: No		
Brief description of filing. (If fil	ling follows rates of an a	dvíson
Organization, specify	ing follows rates of all a	uvisury
organization):	Please see Filing Momo V	Ve are not using rates of an advis
organization.	. roade dec i imig Merrio.	TO CITO HOLDS OF BIT BOYS

^{**}Change in Company's premium level which will result from application of new rates.

FORM (RF-3)

SUMMARY SHEET

Change in Company's prer	nium or rate level	produced by rate revision
effective 08/01/2012		•

(1)	(2)	(3)
	Annual Premium	Percent
Coverage	Volume (Illinois) *	_ Change (+or-) **
Automobile Liability Private		
Passenger		
Commercial		
Automobile Physical Damag		
Private Passenger	•	
Commercial		
Liability Other Than Auto	\$6,675,307	+3.80%
Burglary and Theft	40,000	
Glass		
Fidelity		
Surety		
•		
Boiler and Machinery Fire	The state of the s	
·	······································	
Extended Coverage Inland Marine		
Homeowners		
Commercial Multi-Peril	**************************************	
Crop Hail		
Other		
Life of Insurance		
Does filing only apply to cer Classes? If so,		
specify: This f	iling does not solely apply to co	ertain territories or classes.
Brief description of filing. (If	filling follows rates of an a	advisory
Organization, specify		
organization):	Rate and rule revision)
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
AA 12 1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
*Adjusted to reflect all prior **Change in Company's pre rates.		ult from application of new
	Auto-Owners Insu	rance Company
	Na	ime of Company
	Ken Hoskins - Ass	sistant Manager CP&L Actuaria

FORM (RF-3)

Change in Company's premium	or rate leve	I produced by	rate revision
effective 08/15/2012		•	

-	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$641,061	-0.50%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	·	
14.	Crop Hail		
15.	Other		
	Life of Insurance		
•	Dana filima anti-amata ta anatat		
	Does filing only apply to certai	n territory (territories) or	certain
	Classes? If so,		
	specify: No		
	District Control of Control	'	f
	Brief description of filing. (If fil	ing follows rates of an ac	avisory
	Organization, specify	Davised reting manual	to add now andorsoments and
	organization):		to add new endorsements and
	revise premium and calculation for	numple coverages for endors	ements currently in manual.
	*Adjusted to reflect all prior rate	o changes	
	**Change in Company's premi		t from application of new
	-rates.	an level which will resur	t nom application of new
	Tates:	Carolina Casualty I	nsurance Company
			ne of Company
		Sandra C. Nelson -	, ,
			Official – Title
		~	

		ate level produced by rate revision effective	
	(1)	(2)	(3)
		Annual Premium	Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$485	-19.8%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	The state of the s	
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
IJ.		······································	
	Line of Insurance	territories) or certain classes? If so, specify:	
oes f State Emp	filing only apply to certain territory (wide filing not subject to territory. Tologone Leasing Firms, Trade Associate	vs rates of an advisory organization, specify o	
Ooes f State Empl	filing only apply to certain territory (wide filing not subject to territory. loyee Leasing Firms, Trade Associated description of filing. (If filing follows)	The only ineligible classes are those identified tions, Schools, Municipalities. We rates of an advisory organization, specify of the control of the contro	
Ooes f State Emp	filing only apply to certain territory (wide filing not subject to territory. loyee Leasing Firms, Trade Associated description of filing. (If filing follows)	The only ineligible classes are those identified tions, Schools, Municipalities. We rates of an advisory organization, specify of the control of the contro	
State Emplorations Brief of Rate	filing only apply to certain territory (wide filing not subject to territory. loyee Leasing Firms, Trade Associated description of filing. (If filing follows)	The only ineligible classes are those identified tions, Schools, Municipalities. It is served as served an advisory organization, specify on of a \$2,500 deductible option.	
State Emplored Brief of Rate * A	filing only apply to certain territory (wide filing not subject to territory. Toyee Leasing Firms, Trade Associated description of filing. (If filing follow change (reduction) and introduction	The only ineligible classes are those identified tions, Schools, Municipalities. It is served as a server of the	
State Emplored Brief C Rate * A	filing only apply to certain territory (wide filing not subject to territory. Toyee Leasing Firms, Trade Associated description of filing. (If filing follow change (reduction) and introduction djusted to reflect all prior rate change	The only ineligible classes are those identified tions, Schools, Municipalities. It is served as a server of the	
Poes f State Empl Brief C Rate * A	filing only apply to certain territory (wide filing not subject to territory. Toyee Leasing Firms, Trade Associated description of filing. (If filing follow change (reduction) and introduction distributed to reflect all prior rate change hange in Company's premium level of the subject to t	The only ineligible classes are those identified tions, Schools, Municipalities. It is served as a server of the	
Poes f State Empl Brief C Rate * A	filing only apply to certain territory (wide filing not subject to territory. Toyee Leasing Firms, Trade Associated description of filing. (If filing follow change (reduction) and introduction distributed to reflect all prior rate change hange in Company's premium level of the subject to t	The only ineligible classes are those identified tions, Schools, Municipalities. It is served as a server of the	
oes f State Empl rief (Rate * A	filing only apply to certain territory (wide filing not subject to territory. Toyee Leasing Firms, Trade Associated description of filing. (If filing follow change (reduction) and introduction distributed to reflect all prior rate change hange in Company's premium level of the subject to t	The only ineligible classes are those identified tions, Schools, Municipalities. It is rates of an advisory organization, specify on of a \$2,500 deductible option. The only ineligible classes are those identified to the second of the seco	organization):
oes f State Empl rief (Rate * A	filing only apply to certain territory (wide filing not subject to territory. Toyee Leasing Firms, Trade Associated description of filing. (If filing follow change (reduction) and introduction distributed to reflect all prior rate change hange in Company's premium level of the subject to t	The only ineligible classes are those identified tions, Schools, Municipalities. The only ineligible classes are those identified tions, Schools, Municipalities. The only ineligible classes are those identified tions, Schools, Municipalities. The only ineligible classes are those identified to the classes are those identified to the classes. The only ineligible classes are those identified to the classes are those identified to the classes. The only ineligible classes are those identified to the classes are those identified to the classes. The only ineligible classes are those identified to the classes are those identified to the classes. The only ineligible classes are those identified to the classes are those identified to the classes are those identified to the classes. The only ineligible classes are those identified to the classes are the classes are those identified to the classes are those identified to the classes are the classes ar	organization):
oes f State Emplorief of Rate	filing only apply to certain territory (wide filing not subject to territory. loyee Leasing Firms, Trade Associated description of filing. (If filing follow change (reduction) and introduction distributed to reflect all prior rate change hange in Company's premium level was sult from application of new rates.	The only ineligible classes are those identified tions, Schools, Municipalities. The only ineligible classes are those identified tions, Schools, Municipalities. The only ineligible classes are those identified tions, Schools, Municipalities. The only ineligible classes are those identified to the classes are those identified to the classes. The only ineligible classes are those identified to the classes are those identified to the classes. The only ineligible classes are those identified to the classes are those identified to the classes. The only ineligible classes are those identified to the classes are those identified to the classes. The only ineligible classes are those identified to the classes are those identified to the classes are those identified to the classes. The only ineligible classes are those identified to the classes are the classes are those identified to the classes are those identified to the classes are the classes ar	organization):
oes f State Emplorief of Rate	filing only apply to certain territory (wide filing not subject to territory. Toyee Leasing Firms, Trade Associated description of filing. (If filing follow change (reduction) and introduction distributed to reflect all prior rate change hange in Company's premium level of the subject to t	The only ineligible classes are those identified tions, Schools, Municipalities. The only ineligible classes are those identified tions, Schools, Municipalities. The only ineligible classes are those identified tions, Schools, Municipalities. The only ineligible classes are those identified to the classes are those identified to the classes. The only ineligible classes are those identified to the classes are those identified to the classes. The only ineligible classes are those identified to the classes are those identified to the classes. The only ineligible classes are those identified to the classes are those identified to the classes. The only ineligible classes are those identified to the classes are those identified to the classes are those identified to the classes. The only ineligible classes are those identified to the classes are the classes are those identified to the classes are those identified to the classes are the classes ar	organization):
Poes f State Empl Brief C Rate * A	filing only apply to certain territory (wide filing not subject to territory. loyee Leasing Firms, Trade Associated description of filing. (If filing follow change (reduction) and introduction distributed to reflect all prior rate change hange in Company's premium level was sult from application of new rates.	The only ineligible classes are those identified tions, Schools, Municipalities. The only ineligible classes are those identified tions, Schools, Municipalities. The only ineligible classes are those identified tions, Schools, Municipalities. The only ineligible classes are those identified to the classes are those identified to the classes. The only ineligible classes are those identified to the classes are those identified to the classes. The only ineligible classes are those identified to the classes are those identified to the classes. The only ineligible classes are those identified to the classes are those identified to the classes. The only ineligible classes are those identified to the classes are those identified to the classes are those identified to the classes. The only ineligible classes are those identified to the classes are the classes are those identified to the classes are those identified to the classes are the classes ar	organization):
State Emplored Brief C Rate * A	filing only apply to certain territory (wide filing not subject to territory. loyee Leasing Firms, Trade Associated description of filing. (If filing follow change (reduction) and introduction distributed to reflect all prior rate change hange in Company's premium level was sult from application of new rates.	The only ineligible classes are those identified tions, Schools, Municipalities. It is rates of an advisory organization, specify on of a \$2,500 deductible option. The only ineligible classes are those identified to the second of the seco	erty & Casualty Company Name of Company
state Emplored Frief C Rate * Ac	filing only apply to certain territory (wide filing not subject to territory. loyee Leasing Firms, Trade Associated description of filing. (If filing follow change (reduction) and introduction distributed to reflect all prior rate change hange in Company's premium level was sult from application of new rates.	The only ineligible classes are those identified tions, Schools, Municipalities. The only ineligible classes are those identified tions, Schools, Municipalities. The only ineligible classes are those identified tions, Schools, Municipalities. The only ineligible classes are those identified to the classes are those identified to the classes. The only ineligible classes are those identified to the classes. The only ineligible classes are those identified to the classes. The only ineligible classes are those identified to the classes. The only ineligible classes are those identified to the classes. The only ineligible classes are those identified to the classes. The only ineligible classes are those identified to the classes. The only ineligible classes are those identified to the classes. The only ineligible classes are those identified to the classes. The only ineligible classes are those identified to the classes are those identified to the classes. The only ineligible classes are those identified to the classes are the classes are those identified to the classes are the	organization):

Assistant Vice President

ı	Change in Company's premium or rate	e level produced by rate revision effective	10-1-12
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$2,992	-19.8%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
		rritories) or certain classes? If so, specify	
		ne only ineligible classes are those identifi	ed in the rule: Law Offices,
Emp.	loyee Leasing Firms, Trade Association	ons, Schools, Municipalities.	
		rates of an advisory organization, specify	organization):
Rate	change (reduction) and introduction	of a \$2,500 deductible option.	
* A	dia		
	djusted to reflect all prior rate changes		
	hange in Company's premium level was sult from application of new rates.	nich will	
10	suit from application of new rates.		
		EMCASC	O Insurance Company
			Name of Company
		Linda	a Samson

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SUMMARY SHEET

Assistant Vice President

(Change in Company's premium or rate	level produced by rate revision effective	10-1-12
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
2	Commercial	017.540	10.00/
3.	Liability Other Than Auto	\$17,548	-19.8%
4. 5.	Burglary and Theft Glass		
5. 6.	Fidelity	***************************************	
0. 7.	Surety		
7. 8.	Boiler and Machinery		
o. 9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
15.	Line of Insurance		
	. Ellie of insurance		
		ritories) or certain classes? If so, specify:	
		e only ineligible classes are those identifie	d in the rule: Law Offices,
Emp	loyee Leasing Firms, Trade Association	ns, Schools, Municipalities.	
		rates of an advisory organization, specify	organization):
Rate	change (reduction) and introduction o	f a \$2,500 deductible option.	
	djusted to reflect all prior rate changes.		
	hange in Company's premium level wh	ich will	
re	sult from application of new rates.		
		Employers	Mutual Casualty Company
			Name of Company
			company
		·	
		Linda	Samson

	Change in Company's premiu	m or rate level produced by	rate revision effective	1/1/2013
		(2) Annual Premium Volume (Illinois)	(3) Percent Change (+ or -)	
1.	Automobile Liability Private Passenger Commercial			•
2.	Automobile Physical Damage Private Passenger Commercial			•
3.	Liability Other Than Auto	\$19,578	+20%	<u>.</u>
4.	Burglary and Theft			_
5.	Glass			_
6.	Fidelity			_
7.	Surety			-
8.	Boiler and Machinery			-
9.	Fire			·
10.	Extended Coverage			-
11.	Inland Marine			•
12.	Homeowners			-
13.	Commercial Multi-Peril			-
14.	Crop Hail			-
15.	Other			-
	Line of Insurance			
Doe	s filing only apply to certain territo	ory (territories) or certain cla	sses? If so, specify:	All territories
	c many capped to contain terms	., (, ., .,,	
Brie	f description of filing. (If filing follo	ows rates of an advisory org	ganization, specify orgar	Base rate increase of +20%
				Insurance Company
			Aaron Mills - AVP	e of Company
			Of	ficial - Title

	Change in Company's premiu	m or rate level produced by	rate revision effective	1/1/2013
		(2) Annual Premium Volume (Illinois)	(3) Percent Change (+ or -)	
1.	Automobile Liability Private Passenger Commercial	volume (minolo)	enange (* en)	
2.	Automobile Physical Damage Private Passenger Commercial			
3.	Liability Other Than Auto	\$8,492	+20%	
4.	Burglary and Theft			
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler and Machinery			
9.	Fire			
10.	Extended Coverage			
11.	Inland Marine			
12.	Homeowners			
13.	Commercial Multi-Peril			
14.	Crop Hail			
15.	Other			
	Line of Insurance			
Doe	s filing only apply to certain territo	ory (territories) or certain cla	asses? If so, specify:	All territories
Brief	f description of filing. (If filing follo	ows rates of an advisory org	ganization, specify orgar	Base rate increase of +20%
		- 100 p. (100 p. 100 p.		ters Insurance Company
			Aaron Mills - AVP	e of Company
			Off	icial - Title

•	Change in Company's premium or rat	e level produced by rate revision effective	10-1-12
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$59,840	-19.8%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	•••		
		erritories) or certain classes? If so, specify:	d in the males I arry Offices
	loyee Leasing Firms, Trade Associati	the only ineligible classes are those identified	d if the fule. Law Offices,
Emp	loyee Leasing Firms, Trade Associati	ons, schools, Municipanues.	
	1 ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		i4in\.
		s rates of an advisory organization, specify of	organization):
Rate	change (reduction) and introduction	of a \$2,500 deduction option.	
		And the second s	
* A	djusted to reflect all prior rate change		
	hange in Company's premium level w		
	sult from application of new rates.	mon win	
	out nom appround of non raise.		
		Illinois EM	CASCO Insurance Company
			Name of Company
			·
			Samson
		Assist	ant Vice President
	0.70		Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

Cha	nge in Company's premium or rate	level produced by rate revision	n effective	April 1, 2013
	(1) Coverage	(2) Annual Premium Volume (Illinois)*		(3) Percent Change (+ or -)**
1.	Automobile Liability Commercial			
2.	Automobile Physical Damage Commercial			
3. 4.	Liability Other Than Auto Burglary and Theft	24,712		-12.4%
5. 6.	Glass Fidelity			
7. 8. 9.	Surety Boiler and Machinery Fire			
10.	Extended Coverage Inland Marine			
12.	Homeowners Commercial Multi-Peril			
14.	Crop Hail Other			
	Line of Insurance			
Doe	es filing only apply to certain territor All territories and classes	ry (territories) or certain classe	s? If so, specify:	
	of description of filing> (If filing follows			ion):
Add	pt ISO Loss Costs (circular IL-GL-20	012-199) with an effective date	e or 4/1/2013	
	ljusted to reflect all prior rate chang Change in Company's premium leve		ition of new rates.	
			Liberty Insurance Ur	· · · · ·
			Name of Co	mpany
			Luan Benetti Senior St Official - 1	
			Official -	rice
				• • • •
	· · · · · · · · · · · · · · · · · · ·			

(2) Annual Premium Volume (Illinois)* \$8,744,000	(3) Percent Change (+ or -)** -12.4%
Volume (Illinois)*	
\$8,744,000	-12.4%
\$8,744,000	-12.4%
\$8,744,000	-12.4%
\$8,744,000	-12.4%
\$8,744,000	-12.4%
itories) or certain classes? If so, specify:	
nones) of certain classes: If so, specify.	
nates of an advisory organization, specifying your Department of its intent to nc. (ISO) for our Commercial Gerent with ISO, April 1, 2013.	o adopt revised loss costs
ch will	
	onal Casualty Company Name of Company
1i	nich will

Kristin Clark, Sr. Filings Analyst

(Change in Company's premium or rate	e level produced by rate revision effec	ive 04/01/2013
	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
	Coverage	Volume (Inmois)	<u> </u>
1.	Automobile Liability		
	Private Passenger		
2	Commercial Automobile Physical Damage		
2.	Private Passenger		·
	Commercial		
3.	Liability Other Than Auto	\$881,457	-12.4%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10. 11.	Extended Coverage Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
. 4	iling only apply to certain territory (te	emitories) or certain classes? If so sne	cify:
No.			ony.
NO.			
	/. d		
Brief o	description of filing. (If filing follows	rates of an advisory organization, spe	cify organization):
Ado	ption of Illinois General Liabili	ty Loss Costs as referenced in I	SO Reference Document
	2012-BGL1.		
	djusted to reflect all prior rate change		
	hange in Company's premium level w sult from application of new rates.	men win	
10	suit from application of new rates.		
			National Interstate Insurance
		<u></u>	Company
			Name of Company
		I	Cathy Juhasz, Regulatory
			Compliance Specialist
			Official - Title

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or ra	te level produced by rate revision
effective 08/01/2012	

-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private		3 (
	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto	\$10,193,173	+3.80%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		,
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance		
•	Does filing only apply to certa Classes? If so, specify: This filing	in territory (territories) or ng does not solely apply to ce	
	Brief description of filing. (If fi	iling tollows rates of an a	avisory
	Organization, specify	Data and rule revision	
	organization):	Rate and rule revision	
-	*Adjusted to reflect all prior ra **Change in Company's premates.		It from application of new
		Owners Insurance	Company
			me of Company
		Ken Hoskins - Ass	istant Manager CP&L Actuarial

Change in Company's premium or rate level produced by rate revision effective 1/1/2013

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
_	Commercial		
3.	Liability Other Than Auto	\$ 94,100	-1.2%
4 .	Burglary and Theft		
5.	Glass		
6. -	Fidelity		
7.	Surety		
8.	Boiler and Machinery		2.0%
9.	Fire	\$ 23,800	2.0%
10.	Extended Coverage		
11.	Inland Marine		
12. 13.	Homeowners		
13. 14.	Commercial Multi-Peril		
1 4 . 15.	Crop Hail		
15.	OtherLine of Insurance		
	Line of modrance		
Does	filing only apply to certain territory (territor	ies) or certain classes? If so, specify:	
No			
		of an advisory organization, specify organiza	
We ar	e adopting the package modification fa	ctor revision found in ISO reference filing	ML-2012-RLA1.

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

Pioneer Spec	cialty Insurance Company
	Name of Company
Sara Stark. S	ir. Actuarial Analyst
	Official - Title

		mium or rate level produced by rate	
	revision effective	April 1, 2013	
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
_	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
^	Commercial		40.40/
3.	Liability Other Than Auto	\$41,503	-12.4%
4.	Burglary and Theft		***************************************
5.	Glass	****	
6. 7.	Fidelity		
7. 8.	Surety Pailor and Machinery		
o. 9.	Boiler and Machinery Fire		
9. 10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
	Other		
15.	Other		
15.	Line of Insurance	-	
Doe		y (territories) or certain	
Doe	Line of Insurance s Filing only apply to certain territor	y (territories) or certain	
Doe clas Brie	Line of Insurance s Filing only apply to certain territor ses? If so, specify: N/A description of filing. (If filing follow	s rates of an advisory	
Doe clas Brie	Line of Insurance s Filing only apply to certain territor ses? If so, specify: N/A	s rates of an advisory Adoption of ISO's Commercial G	
Doe clas Brie	Line of Insurance s Filing only apply to certain territor ses? If so, specify: N/A description of filing. (If filing follow	s rates of an advisory	
Doe clas Brie	Line of Insurance s Filing only apply to certain territor ses? If so, specify: N/A description of filing. (If filing follow	s rates of an advisory Adoption of ISO's Commercial G	
Doe clas Brie	Line of Insurance s Filing only apply to certain territor ses? If so, specify: N/A description of filing. (If filing follow	s rates of an advisory Adoption of ISO's Commercial G	
Doe clas Brie	Line of Insurance s Filing only apply to certain territor ses? If so, specify: N/A description of filing. (If filing follow	s rates of an advisory Adoption of ISO's Commercial G	
Doe clas Brie orga	Line of Insurance s Filing only apply to certain territor ses? If so, specify: M/A description of filing. (If filing follow nization, specify organization):	s rates of an advisory Adoption of ISO's Commercial G Advisory Prospective Loss Cost	
Doe clas Brie orga	Line of Insurance s Filing only apply to certain territorses? If so, specify: M/A description of filing. (If filing follow nization, specify organization): Adjusted to reflect all prior rate ch	vs rates of an advisory Adoption of ISO's Commercial G Advisory Prospective Loss Cost	
Doe clas Brie orga	Line of Insurance s Filing only apply to certain territor ses? If so, specify: M/A description of filing. (If filing follow nization, specify organization):	vs rates of an advisory Adoption of ISO's Commercial G Advisory Prospective Loss Cost	
Doe clas Brie orga	Line of Insurance s Filing only apply to certain territorses? If so, specify: N/A description of filing. (If filing follow nization, specify organization): Adjusted to reflect all prior rate che Change in Company's premium le	Adoption of ISO's Commercial G Advisory Prospective Loss Cost anges. evel which will	S
Doe clas Brie orga	Line of Insurance s Filing only apply to certain territorses? If so, specify: N/A description of filing. (If filing follow nization, specify organization): Adjusted to reflect all prior rate che Change in Company's premium le	Adoption of ISO's Commercial G Advisory Prospective Loss Cost anges. evel which will	aza Insurance Company
Doe clas Brie orga	Line of Insurance s Filing only apply to certain territorses? If so, specify: N/A description of filing. (If filing follow nization, specify organization): Adjusted to reflect all prior rate che Change in Company's premium le	Adoption of ISO's Commercial G Advisory Prospective Loss Cost anges. evel which will	S
Doe clas Brie orga	Line of Insurance s Filing only apply to certain territorses? If so, specify: N/A description of filing. (If filing follow nization, specify organization): Adjusted to reflect all prior rate che Change in Company's premium le	Adoption of ISO's Commercial G Advisory Prospective Loss Cost anges. evel which will	aza Insurance Company
Doe clas Brie orga	Line of Insurance s Filing only apply to certain territorses? If so, specify: N/A description of filing. (If filing follow nization, specify organization): Adjusted to reflect all prior rate che Change in Company's premium le	Adoption of ISO's Commercial G Advisory Prospective Loss Cost anges. evel which will es.	aza Insurance Company

(Change in Company's premium or rate	e level produced by rate revision effective	/e April 1, 2013
	(1)	(2) Annual Premium	(3) Percent
	Coverage	<u>Volume (Illinois)*</u>	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$100,000	-12.4%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14. 15.	Crop Hail Other		
13.	Line of Insurance		
	21110 01 11100101100		
Does f	iling only apply to certain territory (te	rritories) or certain classes? If so, speci	fy:
No			
		rates of an advisory organization, speci	
Scot	tsdale Indemnity Company is a	dvising your Department of its in	tent to adopt revised loss
costs	s from the Insurance Services O	office, Inc. (ISO) for our Commer	cial General Liability
prog	ram. We request an effective of	date concurrent with ISO, April 1	, 2013.
	•		
	djusted to reflect all prior rate changes		
	nange in Company's premium level w	hich will	
re	sult from application of new rates.		
		\$c	ottsdale Indemnity
			•
			ompany Name of Commons
			Name of Company

Kristin Clark, Sr. Filings Analyst

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or ra	ate level produced by rate revision
effective_11/01/2012	

-	(1)	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Coverage Automobile Liability Private	volume (minois)	Charige (+01-)
1.	Passenger		
	Commercial		
2			
2	Automobile Physical Damag		•
	Private Passenger Commercial		
3.		2 246 066	+9.3
	Liability Other Than Auto	3,316,966	+9.3
4. 5.	Burglary and Theft Glass		
5. 6.			
7.	Fidelity		
	Surety Dailer and Machinery		
8.	Boiler and Machinery		
9. 40	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
_	Life of Insurance		
*	Does filing only apply to certa Classes? If so,	in territory (territories) or	certain
	specify: LCM Re	evisions to Specialty and Agrib	ousiness Market Lines Segments.
	Brief description of filing. (If f Organization, specify	iling follows rates of an ad	dvisory
	organization):	Adopting ISO filing GL-	2011-BGL1 and revising LCMs
	*Adjusted to reflect all prior ra **Change in Company's prem		t from application of new
	rates.	·	

SECURA Insurance, A Mutual Company

Name of Company

Daniel P Ferris Vice President, General Counsel

Official – Title

FORM (RF-3)

Change in Company's premium or ra	te level produced by rate revision
effective_09/01/2012	

-	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2	Automobile Physical Damag	• • • • • • • • • • • • • • • • • • • •	
	Private Passenger		•
	Commercial	-	
3.	Liability Other Than Auto	13735	30.0
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage	·	
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
1 4 . 15.	Other		
15.	Life of Insurance		
	Life of Insurance		
•	Does filing only apply to certain Classes? If so,	n territory (territories) or	certain
	specify: No		
	oposity.		
	Brief description of filing. (If fil Organization, specify	ing follows rates of an a	dvisory
	organization):	Increase the Employment R	Related Practices Liability rates by 30.0%.
	,		
	*Adjusted to reflect all prior rat **Change in Company's premi		It from application of new
	rates.		
		Sentry Select Insur	
			me of Company
		Mike Williams - VP	
			Official – Title

FORM (RF-3)

Change in Company's premium of	or rate leve	I produced by	rate revision
effective 08/10/2012	•	•	

-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
١.	Automobile Liability Private	- Columbia (miniolo)	
	Passenger		
	Commercial		
	Automobile Physical Damag		***************************************
	Private Passenger		•
	Commercial		
	Liability Other Than Auto	\$250,000	-5%
	Burglary and Theft		
	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
).	Extended Coverage		
1.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril		
4.	Crop Hail		
5.	Other		
	Life of Insurance		
Þ	Does filing only apply to certa Classes? If so,	in territory (territories) o	r certain
	specify: Liquor L	iability only - when there is s	supporting lines of coverage -
	either property or general liability		
	Brief description of filing. (If fi Organization, specify	ling follows rates of an a	advisory
	organization):	Package modification	factor of .95 applied to final
	Liquor premium when supporting lin	nes of business are writtne	· · · · · · · · · · · · · · · · · · ·
	*Adjusted to reflect all prior ra **Change in Company's prem		ult from application of new
	rates.	Specialty Risk of A	America
			me of Company
		Sheila Rooney, Vi	
			Official – Title

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or ra	ate level produced by rate revision
effective 12/19/2012	

(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois) *	Change (+or-) **
Automobile Liability Private		
Passenger		
Commercial		
Automobile Physical Damag		
Private Passenger		
Commercial		
Liability Other Than Auto	\$682,813	-8.1%
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other		
Life of Insurance		
Dana filina and complete and		
Does filing only apply to cert Classes? If so,	ain terniory (terniones) of	ceitain
specify: No		
specify.		
Brief description of filing. (If Organization, specify organization): Division Six: General Liability - Ra		advisory
*Adjusted to reflect all prior r **Change in Company's pre- rates.		ult from application of nev
	State Automobile	Mutual Insurance Co.
		me of Company

Name of Company

Matthew Rowland - State Regulatory Analyst II

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 12/19/2012

-	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2	Automobile Physical Damag Private Passenger		•
2	Commercial	00.050.077	0.40(
3. 1	Liability Other Than Auto	\$2,059,877	-2.4%
4. 5.	Burglary and Theft Glass		
5. 6.		***************************************	
7.	Fidelity		
, . 8.	Surety Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	****	
14.	Crop Hail		
15.	Other		
	Life of Insurance		
•	Does filing only apply to certa Classes? If so,	in territory (territories) or	certain
	specify: No		
	Brief description of filing. (If f Organization, specify organization):	iling follows rates of an ac	dvisory
	Division Six: General Liability - Rat	e/Rule Revision	
			· · · · · · · · · · · · · · · · · · ·
	*Adjusted to reflect all prior ra **Change in Company's prem	•	t from application of new
	rates.	Ctata Auta Dramanti	2 Copyelly inc. Co
	·		/ & Casualty Ins. Co. ne of Company
		ivan	ne or company

Matthew Rowland - State Regulatory Analyst II
Official - Title

Kathy Juhasz, Regulatory Compliance Specialist Official - Title

	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$3,332	-12.4%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	filing only apply to certain territory (to	erritories) or certain classes? If so, specify:	
No.	decomination of filing (If filing fallow	a rates of an advisory organization specific	organization):
No.	description of filing. (If filing follow	s rates of an advisory organization, specify	organization):
No. Brief Ado	pption of Illinois General Liabil	s rates of an advisory organization, specify of ity Loss Costs as referenced in ISO I	organization): Reference Document
No. Brief	description of filing. (If filing follow option of Illinois General Liabil -2012-BGL1.	s rates of an advisory organization, specify of ity Loss Costs as referenced in ISO 1	organization): Reference Document
No. Brief	pption of Illinois General Liabil	s rates of an advisory organization, specify of ity Loss Costs as referenced in ISO I	organization): Reference Document
No. Brief Add	option of Illinois General Liabil -2012-BGL1.	ity Loss Costs as referenced in ISO l	organization): Reference Document
No. Brief Add GL-	option of Illinois General Liabil -2012-BGL1. Adjusted to reflect all prior rate change	ity Loss Costs as referenced in ISO I	organization): Reference Document
No. Brief Ado GL- * A	option of Illinois General Liabil -2012-BGL1. Adjusted to reflect all prior rate change in Company's premium level w	ity Loss Costs as referenced in ISO I	organization): Reference Document
No. Brief Ado GL- * A	option of Illinois General Liabil -2012-BGL1. Adjusted to reflect all prior rate change	ity Loss Costs as referenced in ISO I	organization): Reference Document
No. Brief Add GL- * A	option of Illinois General Liabil -2012-BGL1. Adjusted to reflect all prior rate change in Company's premium level w	ity Loss Costs as referenced in ISO I	organization): Reference Document
No. Brief Add GL- * A	option of Illinois General Liabil -2012-BGL1. Adjusted to reflect all prior rate change in Company's premium level w	es.	organization): Reference Document

H29219D

	Change in Company's premiu	or rate to rer produced 2	_	1/1/2013
		(2) Annual Premium Volume (Illinois)	(3) Percent Change (+ or -)	
1.	Automobile Liability Private Passenger Commercial			
2.	Automobile Physical Damage Private Passenger Commercial			
3.	Liability Other Than Auto	\$0	0%	
4.	Burglary and Theft			
5.	Glass			
6.	Fidelity			
7 .	Surety			
8.	Boiler and Machinery			
9.	Fire			
10.	Extended Coverage			
11.	Inland Marine			
12.	Homeowners			
13.	Commercial Multi-Peril			
14.	Crop Hail			
15.	Other			
	Line of Insurance			
Doe	s filing only apply to certain territo	ory (territories) or certain cla	asses? If so, specify:	All territories
Brie	f description of filing. (If filing follo	ows rates of an advisory or	ganization, specify organ	Base rate increase of +20%
				Insurance Company
			Aaron Mills - AVP	e of Company
			Off	icial - Title

Change in Company's premium or rate level produced by rate revision effective 1/1/2013

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$ 1,197,900	-2.0%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$ 274,800	3.4%
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does	filing only apply to certain territory (territori	es) or certain classes? If so, specify:	
No			
		f an advisory organization, specify organization found in ISO reference filing	
116 01	a adopting the package modification ta	oto: Tottololi loullu III loo Tololelloe IIIII	g av .a 1\br\11

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

Western National Mutual Insurance Company					
Name of Company					

Sara	Stark,	Sr.	Actuarial	Analyst	
			Official	- Title	

H29219D